STATEMENT OF ORGANIZATION		OFFICE USE	
Name and Address of Committee	2. Date of this Statement		
		PAC	
One Louisiana PAC 1051 Kansas Lane	9/15/2015	9/18	
Monroe, LA 71203	3. Estimated Membership	*	5 0
			2
	4. Amended Statement?	, 60 - 0	58
Check If: New Committee X		# 89532 # Tooo	
	Yes <u>x</u> No		
5. All Committee Officers and Directors (including Chairperson, Treasure		fficers and directors)	
a. <u>Name</u> b. <u>Position</u> Katrina R. Jackson Chairperson	c. Address	Monroe, LA 71203	
Ghailpeison	1001 Kansas Lane,	Monroe, LA /1203	
Ann Duplessis Treasurer	130 West Greenbri	ler Dr., New Orleans, 70128	LA
		70120	
6. Affiliated Organizations (Any organization other than a political committee which directly as in		Engagially appropriate this assemble a	
(Any organization, other than a political committee, which directly or in a. Name b. Address	ndirectiy established, administers, or		
NONE		c. Relationship to Committee	
NONE			
All Depositories for Committee Funds (committee funds must be depofunds.)	osited in one or more banks or saving	gs and loan institutions or money ma	rket mutual
a. <u>Name</u> b. <u>Address</u>			
	ard Street, Mõnroe, I	A 71203	
		54.4 5.43 8.45	
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Ch	eck one: Principal Camp	aign Committee Subsidia	ary
b. Name of Candidate		c. Office Sought by the Candidate)
) a	
a. Name of Person Preparing Report		Land Control of the C	· ·
Katrina R. Jackson			
b. Daytime Telephone 318-325-2092		The second secon	
10. WE HEREBY CERTIFY that the information contained in this STATEM and belief.	MENT OF ORGANIZATION is true ar	nd correct to the best of our knowledg	e, information
This 16th day of Saptember, 2015	S HAND	DELIVERED	
y	010	2002	
Signature of Committee Chairperson		325–2092 time Telephone Number	<u> </u>
	,	•	
(de Hattalle	(22	5) 229-919	γ
Signature of Committee Treasurer, if any	Day	time telephone Number	⇒∕